

FOR INSTRUCTIONS, SEE BACK OF FORM

## DISCLOSURE SUMMARY PAGE

Reset Form

<b>FORM DR-2</b> (Rev. 07/2003)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	13427
Logged In	
Scanned	sb
Completed	

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
Goodman for Council

**IMPORTANT:** Indicate type of committee you are reporting for: ☐ 4

( 1 ) Statewide/Legislative Candidate ( 2 ) Statewide PAC ( 3 ) State Party ( 4 ) County/Local Candidate  
( 5 ) County PAC ( 6 ) Ballot Issue/Franchise Committee ( 7 ) County/City Central Committee  
( 8 ) Support State of Candidates

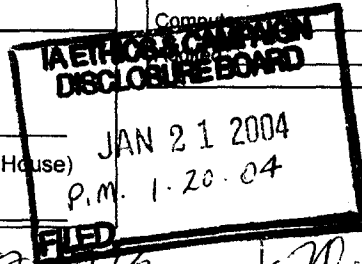
### CANDIDATE COMMITTEES ONLY:

Candidate Name  
Matthew D. Goodman

Political Party  
Independent

Office Sought  
City Council Member At-Large

District (if Senate or House)



*[Signature]*  
**SIGNATURE OF TREASURER** (or person filing this report)

**TELEPHONE**

**DATE SIGNED**

**Late filed reports are subject to possible civil and criminal penalties.**

### SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A January 19 REPORT FOR AN/A (1) ELECTION /(2) NON-ELECTION YEAR.  
(report date)

Indicate one ☐ 1

☒ CHECK IF AMENDMENT TO REPORT DATED December 29, 2004

☒ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a Notice of Dissolution is filed.)

Local Committees, enter Date of Election  
December 2, 2003

County & Local Committees, enter County in  
which Election is held  
Story

### STATEMENT OF CASH ON HAND

**CASH ON HAND** at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)

390.96

#### ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

0.00

Schedule F: Loans Received total (Attach Schedule F)

0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

n/a

**(Schedule H applies to Candidates' Committees Only)**

**SUB-TOTAL** ..... \$ 390.96

#### SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

0.00

Schedule F: Loan Repayments total (Attach Schedule F)

390.96

**CASH ON HAND** at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)

0.00

*I will forward bank statement. NLF*

**\*\*UNPAID BILLS** (From Schedule D - Attach Schedule D) ..... \$ 0.00

**\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) ..... \$ 2609.04

**\*\*OUTSTANDING LOANS** (From Schedule F - Attach Schedule F) ..... \$ 0.00

### CANDIDATE COMMITTEES ONLY:

**CONSULTANT BREAKDOWN** (Schedule G Attached?)

☐ YES ☒ NO

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H)

\$ n/a

FOR INSTRUCTIONS, SEE BACK OF FORM

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Goodman for Council

Reset Form

<b>SCHEDULE</b> <b>E</b> (Rev. 06/97)	<b>IN KIND</b> <b>CONTRIBUTIONS</b>
<input checked="" type="checkbox"/> <b>CHECK THIS BOX IF</b> <b>AMENDING FORM</b>	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
1/20/04	Matthew Goodman, 3303 West Street, Ames, IA, 50014	self	Loan forgiven	\$ 2,609.04	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 2,609.04	
TOTAL (if last page of this schedule)				\$ 2,609.04	

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1  
(for Schedule E)

Reset Form

SCHEDULE <b>F</b> (Rev. 07/03)	LOANS RECEIVED & REPAYED
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Goodman for Council

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 3000.00**PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD**

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
			\$

TOTAL (PART I) \$ \_\_\_\_\_

**PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD**

(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAYED
1.20.04	Matthew Goodman, 3303 West Street, Ames, IA, 50014	self	\$ 390.96

I will forward the bank statement when we receive it.

- NLP

TOTAL CASH REPAYMENTS (PART II) \$ 390.96From Schedule E -- TOTAL LOANS FORGIVEN \$ 2609.04TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 0.00

\*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.

# FOR INSTRUCTIONS, SEE BACK OF FORM

CHECK ONE:

- ☐ This is an **initial\*** Statement of Organization  
☒ This is an **amended\*** Statement of Organization

\*An initial Statement of Organization must be filed within 10 days of the committee's accepting contributions, making expenditures, or incurring indebtedness exceeding \$750. Amendments must be filed within 30 days of a change. Penalties may be imposed for late-filed Statements of Organization.

Reset Form

FORM DR-1 (Rev. 07/2003)	STATEMENT OF ORGANIZATION
<b>For Office Use Only</b>	
Comm. # _____	Indexed _____
Audited _____	Computer _____

COMMITTEE NAME ↓ ↓

Goodman for Council

IMPORTANT: Indicate type of committee you are reporting for:

( 1 ) Statewide/Legislative Candidate ( 2 ) Statewide PAC ( 3 ) State Party ( 4 ) County/Local Candidate ( 5 ) County PAC ( 6 ) Ballot Issue/Franchise Committee ( 7 ) County/City Central Committee

4

COMMITTEE TREASURER (mandatory for all committees)

Name ↓ ↓

Neysa L. Furber

Mailing Address ↓ ↓

3303 West Street

City, State ↓ ↓ Zip Code ↓ ↓

Ames, IA, 50014

Phone ( 515 ) 292-4773

e-Mail furbz@hotmail.com

COMMITTEE CHAIR (mandatory except for a candidate's committee)

Name ↓ ↓

Mailing Address ↓ ↓

City, State ↓ ↓ Zip Code ↓ ↓

Phone ( )

e-Mail

INDICATE PURPOSE OF COMMITTEE - Check One Box ☒ Advocate for/against candidate(s) ☐ Advocate for/against ballot issue(s)  
 Comment or description:

All Candidates Enter: City Council Member At-Large

Political Party (if applicable) Independent

County/Local Candidates and Local Ballot/Franchise Committees Enter:

County: Story

District: \_\_\_\_\_

Year Standing for Election: 2003

Date of Election: ~~12/01/03~~ 12/03/03 NLF

Bank Account Name ↓ ↓

Matthew Goodman

Name of Financial Institution/type of Account ↓ ↓

First National Bank of Ames

Mailing Address ↓ ↓

405 5th Street

City ↓ ↓ State ↓ ↓ Zip ↓ ↓

Ames IA 50014

Candidate name & Address or Parent Entity (PACs, if applicable),  
 Affiliate, or Sponsor

Matthew D. Goodman

Mailing Address ↓ ↓

3303 West Street

City ↓ ↓ State ↓ ↓ Zip ↓ ↓

Ames IA 50014

Phone ( 515 ) 292-4773

e-Mail amesgyroman@mchsi.com

STATEMENT OF AFFIRMATION: By filing this document the committee affirms the following:

- The committee and all persons connected with the committee understand that they are subject to the laws in Iowa Code chapters 68A and 68B and the administrative rules in Chapter 351 of the Iowa Administrative Code.
- That Iowa Code section 68A.402 and rule 351—4.9 require the filing of disclosure reports and that the failure to file these reports on or before the required due dates subjects the candidate or chairperson (in the case of committees other than a candidate's committee) to the automatic assessment of a civil penalty and the possible imposition of other criminal and civil sanctions.
- That Iowa Code section 68A.405 and rules 351—4.38 through 4.43 require the placement of the words "paid for by" and the name of the committee on all political materials except for those items exempted by statute or rule.
- That Iowa Code section 68A.503 and rules 351—4.44 through 4.52 prohibit the receipt of corporate contributions by all committees except for statewide and local ballot issue PACs.
- A candidate and a candidate's committee may only expend campaign funds as permitted by Iowa code sections 68A.301 through 68A.303 and rule 351—4.25.
- That the committee will continue to file disclosure reports until all activity has ceased, committee funds spent, debts resolved, and a final report and a statement of dissolution (DR-2) has been filed.

Signature of Treasurer

Signature of Candidate, OR, for all other committees, Chairperson

Date Signed

Date Signed